

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Special Operations Speaks PAC - SOS PAC

ADDRESS (number and street)

103 Pamlico Place

☐ Check if different than previously reported. (ACC)

Chocowinity

NC

27817

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00524280

3. IS THIS
REPORT☐ NEW
(N)

OR

☒ AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☒ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
01 01 2013

through

M M M / D D D / Y Y Y Y Y Y
06 30 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dan Backer

Signature of Treasurer

Dan Backer

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 20 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Special Operations Speaks PAC - SOS PAC

Report Covering the Period: From: 01 / 01 / 2013 To: 06 / 30 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="YYYY"/> 2013		<input type="text" value="52777.89"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="52777.89"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="100929.60"/>	<input type="text" value="100929.60"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="153707.49"/>	<input type="text" value="153707.49"/>
7. Total Disbursements (from Line 31)	<input type="text" value="121163.12"/>	<input type="text" value="121163.12"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<input type="text" value="32544.37"/>	<input type="text" value="32544.37"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Special Operations Speaks PAC - SOS PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2200.00	2200.00
(ii) Unitemized	7282.00	7282.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	9482.00	9482.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ►	9482.00	9482.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	288.84	288.84
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	91158.76	91158.76
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ►	100929.60	100929.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ►	100929.60	100929.60

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	20457.53	20457.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	20457.53	20457.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5200.00	5200.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	935.00	935.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	935.00	935.00
29. Other Disbursements	94570.59	94570.59
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	121163.12	121163.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	121163.12	121163.12

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	9482.00	9482.00
34. Total Contribution Refunds (from Line 28(d))	935.00	935.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8547.00	8547.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	20457.53	20457.53
37. Offsets to Operating Expenditures (from Line 15, page 3).....	288.84	288.84
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	20168.69	20168.69

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB
.

Form/Schedule: F3XA
Transaction ID :

Amended to reflect changes to previous reports, and to properly report certain receipts and disbursements.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 49
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Guy Bowers

Mailing Address PO BOX 8090

City State Zip Code
 Ruidoso NM 88355

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 06 2013

Transaction ID : SA11AI.16409

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Moe Goswami

Mailing Address 10622 Alloway Drive

City State Zip Code
 Potomac NC 20854

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 28 2013

Transaction ID : SA11AI.16573

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Betty F. Martin

Mailing Address 14912 Knollview Dr.

City State Zip Code
 Dallas TX 75248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 06 2013

Transaction ID : SA11AI.16412

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Charles L Schroeder

Mailing Address 1973 Batchelder Ct

City

El Cajon

State

CA

Zip Code

92020

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2013

Transaction ID : SA11AI.16386

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

2200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Gaylord National Resort and Convention Center

Mailing Address 201 Waterfront St

City State Zip Code
 National Harbor MD 20745

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 25 2013

Transaction ID : SA15.33424

Amount of Each Receipt this Period

288.84

Refund of hotel costs

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

288.84

288.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Clayton D Anderson

Mailing Address 525 N 4200 E

City State Zip Code
Rigby ID 83442

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Flow tester (gas & oil industry)

Opsco energy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 11 / 2013

Transaction ID : SA17.18043

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Clayton D Anderson

Mailing Address 525 N 4200 E

City State Zip Code
Rigby ID 83442

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Flow tester (gas & oil industry)

Opsco energy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 13 / 2013

Transaction ID : SA17.19365

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Clayton D Anderson

Mailing Address 525 N 4200 E

City State Zip Code
Rigby ID 83442

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Flow tester (gas & oil industry)

Opsco energy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 13 / 2013

Transaction ID : SA17.19883

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. judith moncrieff baldwin

Mailing Address 1130 Park Ave.

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 16 / 2013

Transaction ID : SA17.18293

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Brad Barrett

Mailing Address 51 Country Club Drive

City

Canyon

State

TX

Zip Code

79015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2013

Transaction ID : SA17.18769

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. william bentley

Mailing Address 1304 QUIET COVE CT

City

GULF BREEZE

State

FL

Zip Code

32563

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

usn

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 17 / 2013

Transaction ID : SA17.19903

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. John L Blackburn Sr

Mailing Address 10424 Coppedge Ln

City State Zip Code
 Dallas TX 75229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 10 / 2013

Transaction ID : SA17.19351

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Joyce Boghosian

Mailing Address 534 Webster Drive

City State Zip Code
 Martinez CA 94553

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

John Muir Health

Clinical Laboratory Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 30 / 2013

Transaction ID : SA17.16935

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Joyce Boghosian

Mailing Address 534 Webster Drive

City State Zip Code
 Martinez CA 94553

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

John Muir Health

Clinical Laboratory Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 02 / 12 / 2013

Transaction ID : SA17.17145

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Peter Francis Capuciat

Mailing Address 1097 Sunset Road

City

Stamford

State

CT

Zip Code

06903

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 28 / 2013

Transaction ID : SA17.19604

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. henry cubberly

Mailing Address 119 poinsettia dr

City

leesburg

State

FL

Zip Code

34788

FEC ID number of contributing
federal political committee.

C

Name of Employer

none

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 11 / 2013

Transaction ID : SA17.18074

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. henry cubberly

Mailing Address 119 poinsettia dr

City

leesburg

State

FL

Zip Code

34788

FEC ID number of contributing
federal political committee.

C

Name of Employer

none

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 19 / 2013

Transaction ID : SA17.18388

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

575.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. henry cubberly

Mailing Address 119 poinsettia dr

City

leesburg

State

FL

Zip Code

34788

FEC ID number of contributing
federal political committee.

C

Name of Employer

none

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 10 / 2013

Transaction ID : SA17.19340

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. henry cubberly

Mailing Address 119 poinsettia dr

City

leesburg

State

FL

Zip Code

34788

FEC ID number of contributing
federal political committee.

C

Name of Employer

none

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

05 / 21 / 2013

Transaction ID : SA17.19525

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. PHILIP DEANS

Mailing Address 5122 Colonial Drive

City

Pearland

State

TX

Zip Code

77584-7077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 14 / 2013

Transaction ID : SA17.17290

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. DOLORES S EIDENIER

Mailing Address 11001 N 24TH AVE
#603

City State Zip Code
PHOENIX AZ 85029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 20 / 2013

Transaction ID : SA17.17449

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. James Eller

Mailing Address 3587 Conrad Street

City State Zip Code
San Diego CA 92117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 23 / 2013

Transaction ID : SA17.19572

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. LAURENCIO ROBERTO GARZA

Mailing Address 6509 MONMOUTH MEWS

City State Zip Code
MONTGOMERY AL 36117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 07 / 2013

Transaction ID : SA17.19832

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Bob Greenspan

Mailing Address 21376 Carabela

City State Zip Code
Mission Viejo CA 92692

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2013

Transaction ID : SA17.19696

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Carole Hardcastle

Mailing Address 9500 Huntsman Oak Ct

City State Zip Code
Bakersfield CA 93311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2013

Transaction ID : SA17.18941

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Carole Hardcastle

Mailing Address 9500 Huntsman Oak Ct

City State Zip Code
Bakersfield CA 93311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2013

Transaction ID : SA17.19683

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Jane Christine Hopkins

Mailing Address 255 Staples Avenue

City

San Francisco

State

CA

Zip Code

94112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 15 / 2013

Transaction ID : SA17.16807

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. michael john kostas

Mailing Address 2810 cobb lane

City

smyrna

State

GA

Zip Code

30082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 19 / 2013

Transaction ID : SA17.17419

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Paul F. Lamay

Mailing Address 4439 Fair Stone Dr.
#201

City

Fairfax

State

VA

Zip Code

22033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Fairfax County Public Schools

Specialist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 14 / 2013

Transaction ID : SA17.19373

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Mark Langfan

Mailing Address 480 Park Avenue
Apt 20H

City State Zip Code
New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2013

Transaction ID : SA17.17745

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Peter Joseph Larsen

Mailing Address 4606 Sidney Road
PO Box 165

City State Zip Code
Sidney MI 48885

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Larsen Trucking Inc

CEO/President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 06 / 2013

Transaction ID : SA17.17616

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Peter Joseph Larsen

Mailing Address 4606 Sidney Road
PO Box 165

City State Zip Code
Sidney MI 48885

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Larsen Trucking Inc

CEO/President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 04 / 2013

Transaction ID : SA17.17870

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Peter Joseph Larsen

Mailing Address 4606 Sidney Road
PO Box 165

City State Zip Code
Sidney MI 48885

FEC ID number of contributing
federal political committee.

C

Name of Employer

Larsen Trucking Inc

Occupation

CEO/President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 06 / 2013

Transaction ID : SA17.19053

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Peter Joseph Larsen

Mailing Address 4606 Sidney Road
PO Box 165

City State Zip Code
Sidney MI 48885

FEC ID number of contributing
federal political committee.

C

Name of Employer

Larsen Trucking Inc

Occupation

CEO/President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2013

Transaction ID : SA17.19820

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Henry Stewart Michelini

Mailing Address 2801 Sylvia Drive SE

City State Zip Code
Deatur AL 35603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 12 / 2013

Transaction ID : SA17.18221

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Charles Neild

Mailing Address 3415 Locust Hill Rd

City

Taylors

State

SC

Zip Code

29687-6044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2013

Transaction ID : SA17.20517

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Charles Neild

Mailing Address 3415 Locust Hill Rd

City

Taylors

State

SC

Zip Code

29687-6044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2013

Transaction ID : SA17.20518

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

c. Charles Neild

Mailing Address 3415 Locust Hill Rd

City

Taylors

State

SC

Zip Code

29687-6044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2013

Transaction ID : SA17.20542

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. David Parkinson

Mailing Address 12490 Greylin Way

City State Zip Code
Orange VA 22960

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2013

Transaction ID : SA17.20521

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Elaine Susanne Price

Mailing Address 2431 Aloma Ave #124

City State Zip Code
Winter Park FL 32792

FEC ID number of contributing
federal political committee.

C

Name of Employer
physician

Occupation
condono global health systems, LLC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 13 / 2013

Transaction ID : SA17.19885

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Gregory B. Primm

Mailing Address 52 Midnight Ridge Drive

City State Zip Code
Las Vegas NV 89135-1680

FEC ID number of contributing
federal political committee.

C

Name of Employer
entrepreneur

Occupation
Battle Born Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2013

Transaction ID : SA17.17921

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Melissa Putnam

Mailing Address 11838 Mackey St.

City State Zip Code
 Overland Park KS 66210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unemployed

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 05 / 2013

Transaction ID : SA17.17584

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Melissa Putnam

Mailing Address 11838 Mackey St.

City State Zip Code
 Overland Park KS 66210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unemployed

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 04 / 2013

Transaction ID : SA17.17868

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Anne Rutherford

Mailing Address 534 Heavitree Hill

City State Zip Code
 Severna Park MD 21146

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 11 / 2013

Transaction ID : SA17.17971

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Walter Felix Taraska

Mailing Address 85 Lexington Ave

City

Gloucester

State

MA

Zip Code

01930

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2013

Transaction ID : SA17.19307

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. BOB TOWNE

Mailing Address 91-1156 Paapaana St

City

Ewa Beach

State

HI

Zip Code

96706

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2013

Transaction ID : SA17.18367

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. BOB TOWNE

Mailing Address 91-1156 Paapaana St

City

Ewa Beach

State

HI

Zip Code

96706

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2013

Transaction ID : SA17.19220

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. BOB TOWNE

Mailing Address 91-1156 Paapaana St

City

Ewa Beach

State

HI

Zip Code

96706

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

06 / 05 / 2013

Transaction ID : SA17.19804

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Kathryn Wood Zenthoefer

Mailing Address 24 Stonebriar Way

City

Frisco

State

TX

Zip Code

75034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kathryn J. Wood, M.D., P.A.

Occupation

physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 01 / 2013

Transaction ID : SA17.17814

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Kathryn Wood Zenthoefer

Mailing Address 24 Stonebriar Way

City

Frisco

State

TX

Zip Code

75034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kathryn J. Wood, M.D., P.A.

Occupation

physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 02 / 2013

Transaction ID : SA17.18945

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Kathryn Wood Zenthoefer

Mailing Address 24 Stonebriar Way

City State Zip Code
 Frisco TX 75034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kathryn J. Wood, M.D., P.A.

Occupation

physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 31 / 2013

Transaction ID : SA17.19671

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Kathryn Wood Zenthoefer

Mailing Address 24 Stonebriar Way

City State Zip Code
 Frisco TX 75034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kathryn J. Wood, M.D., P.A.

Occupation

physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 27 / 2013

Transaction ID : SA17.33433

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

10150.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 100 North Tryon St.

City Charlotte State NC Zip Code 28255

Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 04 2013
Transaction ID : SB21B.33318

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 100 North Tryon St.

City Charlotte State NC Zip Code 28255

Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 04 2013
Transaction ID : SB21B.33320

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 100 North Tryon St.

City Charlotte State NC Zip Code 28255

Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 06 2013
Transaction ID : SB21B.33321

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 49

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 100 North Tryon St.

City Charlotte State NC Zip Code 28255

Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2013
Transaction ID : SB21B.33322

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 100 North Tryon St.

City Charlotte State NC Zip Code 28255

Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 21 / 2013
Transaction ID : SB21B.33323

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. DB Capitol Strategies PLLCMailing Address 203 South Union St
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Legal and compliance consulting

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 01 / 2013
Transaction ID : SB21B.20579

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2050.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. DB Capitol Strategies PLLCMailing Address 203 South Union St
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Legal AOR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 03 2013**Transaction ID : SB21B.20598**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. InfoCision Management Corp.

Mailing Address 325 Springside Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement
Fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 01 2013**Transaction ID : SB21B.20580**

Amount of Each Disbursement this Period

622.53

Full Name (Last, First, Middle Initial)

C. Political Media, Inc.Mailing Address 406 First Se. SE
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Advertisements

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 28 2013**Transaction ID : SB21B.20578**

Amount of Each Disbursement this Period

7500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

18122.53

20272.53

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF COLONEL ROB MANESS

Mailing Address PO BOX 25

City MADISONVILLE	State LA	Zip Code 70447
----------------------	-------------	-------------------

Purpose of Disbursement
Contribution

011

Candidate Name

ROBERT L COLONEL MANESSCategory/
Type
 Office Sought: ☐ House
☒ Senate
☐ President

 Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2013

Transaction ID : SB23.20622

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

B. LARRY GROOMS FOR CONGRESS

Mailing Address PO BOX 355

City BONNEAU	State SC	Zip Code 29431
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

011

Candidate Name

LAWRENCE K GROOMSCategory/
Type
 Office Sought: ☒ House
☐ Senate
☐ President

 Disbursement For: 2013
☐ Primary ☐ General
☒ Other (specify) ▼
 Special-Primary

State: SC District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2013

Transaction ID : SB23.20620

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5200.00

5200.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Mark E Harding

Mailing Address 116 Salt Marsh Cove

City	State	Zip Code
Sneads Ferry	NC	28460

Purpose of Disbursement
Refund of contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2013

Transaction ID : SB28A.33389

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mark E Harding

Mailing Address 116 Salt Marsh Cove

City	State	Zip Code
Sneads Ferry	NC	28460

Purpose of Disbursement
Refund of contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2013

Transaction ID : SB28A.33390

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

200.00

200.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
CAREY - Merchant fees

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2013

Transaction ID : SB29.33331

Amount of Each Disbursement this Period

37.90

Full Name (Last, First, Middle Initial)

B. Captain Larry Bailey USN (Ret.)

Mailing Address 103 Pamlico Place

City	State	Zip Code
Chocowinity	NC	27817

Purpose of Disbursement
CAREY - Travel

002

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2013

Transaction ID : SB29.20615

Amount of Each Disbursement this Period

2231.71

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 100 North Tryon St.

City	State	Zip Code
Charlotte	NC	28255

Purpose of Disbursement
CAREY - bank fees

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2013

Transaction ID : SB29.33396

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2319.61

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 100 North Tryon St.

City	State	Zip Code
Charlotte	NC	28255

Purpose of Disbursement
CAREY - bank fees

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2013

Transaction ID : SB29.33397

Amount of Each Disbursement this Period

59.43

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 100 North Tryon St.

City	State	Zip Code
Charlotte	NC	28255

Purpose of Disbursement
CAREY - bank fees

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2013

Transaction ID : SB29.33398

Amount of Each Disbursement this Period

50.18

Full Name (Last, First, Middle Initial)

C. Batteries for the Troops

Mailing Address 47967 25th St. E.

City	State	Zip Code
Lancaster	CA	93535

Purpose of Disbursement
CAREY - Charitable Gift

012

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2013

Transaction ID : SB29.20610

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

409.61

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Berg Associates, LLCMailing Address 110 E. Broward Blvd.
STE 1700

City Ft. Lauderdale State FL Zip Code 33301

Purpose of Disbursement
CAREY - Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2013

Transaction ID : SB29.20593

Amount of Each Disbursement this Period

1074.03

Full Name (Last, First, Middle Initial)

B. Dick Brauer

Mailing Address 24 Country Club Rd.

City Shalimar State FL Zip Code 32579

Purpose of Disbursement
CAREY - event services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2013

Transaction ID : SB29.20585

Amount of Each Disbursement this Period

658.20

Full Name (Last, First, Middle Initial)

C. Dick Brauer

Mailing Address 24 Country Club Rd.

City Shalimar State FL Zip Code 32579

Purpose of Disbursement
CAREY - Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2013

Transaction ID : SB29.20588

Amount of Each Disbursement this Period

182.60

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1914.83

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Dick Brauer

Mailing Address 24 Country Club Rd.

City	State	Zip Code
Shalimar	FL	32579

Purpose of Disbursement
CAREY - Administrative

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2013

Transaction ID : SB29.20589

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. Dick Brauer

Mailing Address 24 Country Club Rd.

City	State	Zip Code
Shalimar	FL	32579

Purpose of Disbursement
CAREY- Travel

002

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2013

Transaction ID : SB29.20594

Amount of Each Disbursement this Period

1254.12

Full Name (Last, First, Middle Initial)

C. Dick Brauer

Mailing Address 24 Country Club Rd.

City	State	Zip Code
Shalimar	FL	32579

Purpose of Disbursement
CAREY - Travel

002

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2013

Transaction ID : SB29.20604

Amount of Each Disbursement this Period

56.65

SUBTOTAL of Disbursements This Page (optional)..... ►

1910.77

TOTAL This Period (last page this line number only)..... ►

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Caddis Advertising, LLC

Mailing Address 1975 North Fence Line Court

City	State	Zip Code
Prescott Valley	AZ	86314

Purpose of Disbursement
CAREY - Advertising

004

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2013

Transaction ID : SB29.20584

Amount of Each Disbursement this Period

757.19

Full Name (Last, First, Middle Initial)

B. CPACMailing Address 1331 H Street, NW
STE 500

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
CAREY - CPAC

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2013

Transaction ID : SB29.20577

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. DB Capitol Strategies PLLCMailing Address 203 South Union St
Ste 300

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
CAREY - Legal and compliance consulting

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		02		2013

Transaction ID : SB29.33310

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5757.19

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

Special Operations Speaks PAC - SOS PAC

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:

District:

04 / 01 / 2013

001

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:

District:

001

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:

District:

6000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. DB Capitol Strategies PLLCMailing Address 203 South Union St
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
CAREY - Legal and compliance consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2013

Transaction ID : SB29.20605

Amount of Each Disbursement this Period

166.86

Full Name (Last, First, Middle Initial)

B. DB Capitol Strategies PLLCMailing Address 203 South Union St
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
CAREY - Legal and compliance consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2013

Transaction ID : SB29.20611

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. DB Capitol Strategies PLLCMailing Address 203 South Union St
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
CAREY - Legal and compliance consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2013

Transaction ID : SB29.20616

Amount of Each Disbursement this Period

126.30

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2293.16

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Linda Eddy

Mailing Address P.O. BOX 171

City	State	Zip Code
Webster City	IA	50595

Purpose of Disbursement
CAREY - Design Work

004

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		09		2013

Transaction ID : SB29.20568

Amount of Each Disbursement this Period

669.98

Full Name (Last, First, Middle Initial)

B. Linda Eddy

Mailing Address P.O. BOX 171

City	State	Zip Code
Webster City	IA	50595

Purpose of Disbursement
CAREY - Business stationary

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2013

Transaction ID : SB29.20599

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

C. Bill Finlay

Mailing Address 320 Moccasin Creek Ln

City	State	Zip Code
Elkton	FL	32033

Purpose of Disbursement
CAREY - Travel

002

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2013

Transaction ID : SB29.20597

Amount of Each Disbursement this Period

636.90

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1376.88

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Gaylord National Resort and Convention Center

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2013

Mailing Address 201 Waterfront St

City	State	Zip Code
National Harbor	MD	20745

Purpose of Disbursement
CAREY - hotel costs

002

Candidate Name

Category/
Type**Transaction ID : SB29.33401**

Amount of Each Disbursement this Period

866.52

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Gaylord National Resort and Convention Center

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2013

Mailing Address 201 Waterfront St

City	State	Zip Code
National Harbor	MD	20745

Purpose of Disbursement
CAREY - hotel costs

002

Candidate Name

Category/
Type**Transaction ID : SB29.33403**

Amount of Each Disbursement this Period

288.84

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Gaylord National Resort and Convention Center

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2013

Mailing Address 201 Waterfront St

City	State	Zip Code
National Harbor	MD	20745

Purpose of Disbursement
CAREY - hotel costs

002

Candidate Name

Category/
Type**Transaction ID : SB29.33404**

Amount of Each Disbursement this Period

866.52

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2021.88

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Gaylord National Resort and Convention Center

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2013

Mailing Address 201 Waterfront St

Transaction ID : SB29.33405

City	State	Zip Code
National Harbor	MD	20745

Amount of Each Disbursement this Period

Purpose of Disbursement
CAREY - hotel costs

002

923.76

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Gaylord National Resort and Convention Center

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2013

Mailing Address 201 Waterfront St

Transaction ID : SB29.33406

City	State	Zip Code
National Harbor	MD	20745

Amount of Each Disbursement this Period

Purpose of Disbursement
CAREY - hotel costs

002

1254.78

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. InfoCision Management Corp.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2013

Mailing Address 325 Springside Drive

Transaction ID : SB29.20575

City	State	Zip Code
Akron	OH	44333

Amount of Each Disbursement this Period

Purpose of Disbursement
CAREY - Fundraising

003

560.54

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2739.08

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. InfoCision Management Corp.

Mailing Address 325 Springside Drive

City Akron	State OH	Zip Code 44333
---------------	-------------	-------------------

Purpose of Disbursement
CAREY - Fundraising

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2013

Transaction ID : SB29.20581

Amount of Each Disbursement this Period

778.64

Full Name (Last, First, Middle Initial)

B. InfoCision Management Corp.

Mailing Address 325 Springside Drive

City Akron	State OH	Zip Code 44333
---------------	-------------	-------------------

Purpose of Disbursement
CAREY - Fundraising

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2013

Transaction ID : SB29.20582

Amount of Each Disbursement this Period

5.20

Full Name (Last, First, Middle Initial)

C. InfoCision Management Corp.

Mailing Address 325 Springside Drive

City Akron	State OH	Zip Code 44333
---------------	-------------	-------------------

Purpose of Disbursement
CAREY - Fundraising

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2013

Transaction ID : SB29.20591

Amount of Each Disbursement this Period

36.67

SUBTOTAL of Disbursements This Page (optional)..... ►

820.51

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. InfoCision Management Corp.

Mailing Address 325 Springside Drive

City Akron	State OH	Zip Code 44333
---------------	-------------	-------------------

Purpose of Disbursement
CAREY - Fundraising

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2013

Transaction ID : SB29.20606

Amount of Each Disbursement this Period

1180.16

Full Name (Last, First, Middle Initial)

B. InfoCision Management Corp.

Mailing Address 325 Springside Drive

City Akron	State OH	Zip Code 44333
---------------	-------------	-------------------

Purpose of Disbursement
CAREY - Fundraising

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2013

Transaction ID : SB29.20612

Amount of Each Disbursement this Period

438.69

Full Name (Last, First, Middle Initial)

C. InfoCision Management Corp.

Mailing Address 325 Springside Drive

City Akron	State OH	Zip Code 44333
---------------	-------------	-------------------

Purpose of Disbursement
CAREY - Fundraising

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2013

Transaction ID : SB29.20617

Amount of Each Disbursement this Period

5157.75

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6776.60

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
CAREY - Merchant fees

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2013

Transaction ID : SB29.33415

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
CAREY - Merchant fees

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2013

Transaction ID : SB29.33416

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
CAREY - Merchant fees

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		18		2013

Transaction ID : SB29.33417

Amount of Each Disbursement this Period

29.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
CAREY - Merchant fees

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2013

Transaction ID : SB29.33418

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
CAREY - Merchant fees

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2013

Transaction ID : SB29.33419

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
CAREY - Merchant fees

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2013

Transaction ID : SB29.33420

Amount of Each Disbursement this Period

29.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
CAREY - Merchant fees

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : SB29.33421

Amount of Each Disbursement this Period

3268.07

Full Name (Last, First, Middle Initial)

B. Political Media, Inc.Mailing Address 406 First Se. SE
3rd Floor

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
CAREY - Advertisements

004

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2013

Transaction ID : SB29.20572

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

C. Political Media, Inc.Mailing Address 406 First Se. SE
3rd Floor

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
CAREY - Marketing

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2013

Transaction ID : SB29.20587

Amount of Each Disbursement this Period

7500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

18268.07

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Political Media, Inc.Mailing Address 406 First Se. SE
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
CAREY - Advertisement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2013

Transaction ID : SB29.20590

Amount of Each Disbursement this Period

9168.68

Full Name (Last, First, Middle Initial)

B. Political Media, Inc.Mailing Address 406 First Se. SE
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
CAREY - Advertising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2013

Transaction ID : SB29.20607

Amount of Each Disbursement this Period

7801.00

Full Name (Last, First, Middle Initial)

C. Political Media, Inc.Mailing Address 406 First Se. SE
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
CAREY - Advertising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2013

Transaction ID : SB29.20608

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

21969.68

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Political Media, Inc.Mailing Address 406 First Se. SE
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
CAREY - Advertising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2013

Transaction ID : SB29.20613

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. RAM MarketingMailing Address 1 Flowerfield
Suite 10

City St. James State NY Zip Code 11780

Purpose of Disbursement
CAREY - telemarketing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	04	/	2013

Transaction ID : SB29.33315

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Rapid Response Television, LLC

Mailing Address PO Box 36819

City Canton State OH Zip Code 44735

Purpose of Disbursement
CAREY - Advertising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2013

Transaction ID : SB29.20601

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Rapid Response Television, LLC

Mailing Address PO Box 36819

City	State	Zip Code
Canton	OH	44735

Purpose of Disbursement
CAREY - Advertising

004

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2013

Transaction ID : SB29.20602

Amount of Each Disbursement this Period

7375.00

Full Name (Last, First, Middle Initial)

B. Rapid Response Television, LLC

Mailing Address PO Box 36819

City	State	Zip Code
Canton	OH	44735

Purpose of Disbursement
CAREY - Advertising

004

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2013

Transaction ID : SB29.20603

Amount of Each Disbursement this Period

2651.38

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10026.38

94031.80